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PTO/SB/21 (09-04)

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/511,009
Filing Date	I.A. April 10, 2003
First Named Inventor	Ronit Satchi-Fainaro
Art Unit	To be assigned
Examiner Name	To be assigned
Attorney Docket Number	701039-052585-US

### ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Certificate of Mailing; Reference B2-B3 and C55-C59; and Return Receipt Postcard.
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

#### Remarks

The Commissioner is hereby authorized to charge any fee deficiencies or credit any overpayment to the Nixon Peabody LLP Deposit Account 50-0850.

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	NIXON PEABODY LLP		
Signature	<i>[Signature]</i>		
Printed name	David S. Resnick		
Date	9/1/05	Reg. No.	34,235

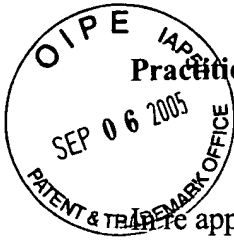
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Signature	<i>Catherine Kearns</i>		
Typed or printed name	Catherine Kearns	Date	9/1/05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Practitioner's Docket No. 701039-052585-US

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Re application of: Satchi-Fainaro et al.

Application No.: 10/511,009

Group No.: To be assigned

Filed: I.A. April 10, 2003

Examiner: To be assigned

For: TNP-470 SPECIES, POLYMER CONJUGATES AND USE THEREOF

**MAIL STOP AMENDMENT**

**Commissioner for Patents**

**P.O. Box 1450**

**Alexandria, VA 22313-1450**

**CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8(a)**

I hereby certify that the attached correspondence comprising:

1. Certificate of Mailing (1 pg.);
2. Transmittal Form (1 pg.);
3. Supplemental Information Disclosure Statement (1 pp.);
4. Form 1449 (1 pg);
5. COPY – References B2-B2 and C55-C59 and
6. Return Receipt Postcard.

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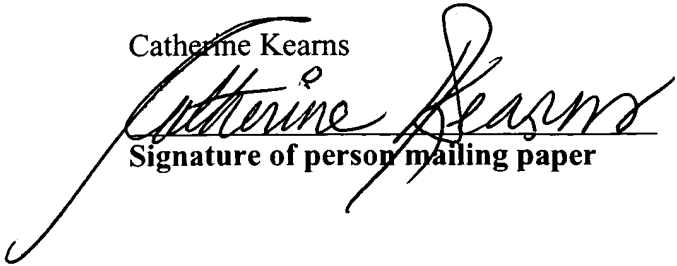
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**Alexandria, VA 22313-1450**

on September 1, 2005

Catherine Kearns

  
Signature of person mailing paper



Docket No. 701039-052585 US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Satchi-Fainaro et al.

Application No.: 10/511,009

Group No.: To be Assigned

Filed: 04/10/2003

Examiner: To be Assigned

For: TNP-470 SPECIES, POLYMER CONJUGATES AND USE  
THEREOF

MAIL STOP AMENDMENT

Commissioner for Patents

P. O. Box 1450

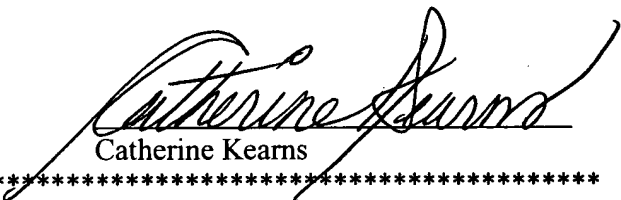
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Date: September 1, 2005

  
Catherine Kearns

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Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

In accordance with the provisions of 37 C.F.R. §§1.56 and 1.97, Applicants herewith submit the publications and/or patents shown on the attached form PTO-1449, for consideration by the Examiner in connection with the examination of the above-identified patent application.

**I. REMARKS**

In accordance with the provisions of 37 C.F.R. §1.97, this statement is being filed:

- X (1) within three (3) months of the Filing Date or **before the mailing date of the First Office Action** on the merits; or
- (2) within three months of the mailing date of the European Search Report; or
- (3) after the period defined in (1) but before the mailing date of a **Final Rejection or Notice of Allowance**, and the requisite Certification or fee under Rule 1.17(p), namely **\$180.00**, is included herein; or
- (4) after the mailing date of a **Final Rejection or Notice of Allowance** but before the payment of the **Issue Fee**, and the requisite Certification, petition, and petition fee are included herein.

It is respectfully requested that each of the documents shown on the attached form(s) PTO-1449 be made of record in this application. Copies of these documents (CHECK ONE):

- X are enclosed herewith; and
- have been cited in the parent application, and are thus not being resubmitted herein.

Early examination and allowance of the present application are respectfully solicited.

**FEE AUTHORIZATION**

Should any fees associated with the submission be required, the Commissioner is authorized to charge the missing fee to our Deposit Account No. 50-0850. Any overpayments should be credited to said Deposit Account.

Respectfully submitted,



David S. Resnick (Reg. 34,235)  
NIXON PEABODY LLP  
100 Summer Street  
Boston, MA 02110  
(617) 345-6057

Date: September 1, 2005

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Substitute for form 1449 PTO		<b>Complete if Known</b>			
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (use as many sheets as necessary)		Application Number	10/511,009		
		Filing Date	04/10/2003		
		First Named Inventor	Ronit Satchi-Fainaro		
		Art Unit	To be assigned		
		Examiner Name	To be assigned		
Sheet	1	of	1	Attorney Docket Number	701039-052585-US

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number – Kind Code* (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document Country Code3 – Number4 – Kind Code5 (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant Of Cited Document	Pages, Columns, Lines Where Relevant Passages or Relevant Figures Appear	T <sup>2</sup>
	B2	WO 01/36002	05/25/01	SEARLE FRANCES et al.		
	B3	WO 02/098446	12/12/02	EKWURIBE NNOCHIRI et al.		

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T <sup>2</sup>
	C55	NOGUCHI, A., et al., <i>Bioconjugate Chem.</i> , 3 (2): 132-137 (1992).	
	C56	YASUKAWA, T., et al., <i>IOVS</i> 40 (11): 2690-2696 (1999).	
	C57	YAMAOKA, T., et al, <i>Journal of Pharmaceutical Sciences</i> , 83 (4): 601-606 (1994).	
	C58	YAMAOKA, T., et al., <i>Journal of Pharmaceutical Pharmacology</i> , 47: 479-486 (1995).	
	C59	MURAKAMI, Y., et al., <i>Drug Delivery</i> , 4: 23-31 (1997).	

Examiner Signature		Date Considered	
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\*EXAMINER if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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